

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jul 13, 2006 8:00 am**  
**Secretary of State**

07-13-2006 90022 025 \*\*\*\*61.25

**DOCUMENT # N01000004459**

1. Entity Name  
ZION FELLOWSHIP BAPTIST CHURCH, INC.



Principal Place of Business  
4690 LIPSCOMB ST.  
4-B  
PALM BAY, FL 32905

Mailing Address  
4960 LIPSCOMB ST  
4-B  
PALM BAY, FL 32905

**50022476**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

04282005 Chg-NP CR2E037 (10/03)

City & State

City & State

4. FEI Number  
59-3550954

Applied For  
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ \$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

WHITE, GEORGE H  
4690 LIPSCOMB ST.  
PALM BAY, FL 32905

Name

Street Address (P.O. Box Number is Not Acceptable)

268 N. BACKCOCK ST

City

MELBOURNE

FL

Zip Code

32935

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25  
Due by May 1, 2005**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

**Make check payable to  
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> Delete
NAME	WHITE, GEORGE H	
STREET ADDRESS	2535 WASHINGTON ST.	
CITY-ST-ZIP	MELBOURNE, FL 32901	
TITLE	D	<input type="checkbox"/> Delete
NAME	WHITE, LAKEBA K	
STREET ADDRESS	146 RACHEL ST., APT. #1	
CITY-ST-ZIP	MELBOURNE, FL 32901	
TITLE	D	<input type="checkbox"/> Delete
NAME	BATTLE, CORETTA H	
STREET ADDRESS	841 GILLEN AVE.	
CITY-ST-ZIP	PALM BAY, FL 32907	
TITLE	D	<input type="checkbox"/> Delete
NAME	WHITE, MARY C	
STREET ADDRESS	2535 WASHINGTON ST.	
CITY-ST-ZIP	MELBOURNE, FL 32901	
TITLE	D	<input type="checkbox"/> Delete
NAME	WILLIAMS, ELLISTON	
STREET ADDRESS	1245 PALM BAY RD., APT. 101	
CITY-ST-ZIP	PALM BAY, FL 32905	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:**

*George H. White*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7-11-06 321-431-0585

Date

Daytime Phone #